Quantity Purchase Agreement With The State Of Indiana

Vendor MEDICAL STAFFING NETWORK INC

Remit to: P O BOX 840416

P O BOX 840416 DALLAS TX 75284

Name and MEDICAL STAFFING NETWORK INC

Address Cntct: Becky Jurczak
of Vendor: 2819 MAPLECREST ROAD
Fort Wayne IN 46815

 Qty Purchase Agreement QPA Number
 Page

 00000000000000000000009696
 1 of 1

Requisition Nbr.: ASA5-5-41 (RFP 4-86)

Effective Date: 08/15/2004 Expiration Date: 08/14/2006

Agency Number:

Facility: All State Agency
Vendor Federal ID: 593489868

Vendor Telephone Nbr: 260/485-4459-Name Of Contact Pers: Becky Jurczak
FAX Number: 260/485-4460--

In accordance with your bid, submitted in response to the above referenced solicitation, the Vendor agrees that the Indiana Department of Administration, Procurement Division. has the option to purchase the items listed below under the terms of this agreement.

The Vendor agrees to charge these prices for any products ordered on any QPA release received after the expiration of the QPA but issued prior to the expiration date. The quantity listed herein is an estimate of the requirements. The state may order substantially more or substantially less pursuant to the terms of this agreement.

Orders are to be delivered only upon receipt of properly approved Quantity Purchase Award Release.

Line Number Quantity UNIT

1

Article and Description

Unit Price

This is an award of a Quantity Purchase Agreement for Nursing Services for a period of one year to begin August 15, 2004 and end August 14, 2006 or two years from date of last signature whichever is later.

Instructions for use of this contract can be found at www.in.gov/idoa/proc and click on the following:

- 1. Quantity Purchase Agreements
- Instructions for Nursing Contracts

QPA can be mutually renewed yearly for three additional years.

The vendor agrees to charge these prices for any products ordered on any QPA release received after the expiration date, but issued prior to the expiration date, and postmarked no later than 14 business days after the QPA's expiration date.

Quantities are estimates and could be more or less. The awarded vendor must maintain, at a minimum, the following information and be capable of supplying a report within one week of a request by the State:

- 1. Quantity and Type of Products, including any options, purchased by any State Agency and/or Political Subdivision, separated by each.
- 2. Total Dollar value of purchases made, separated by State Agency and/or Political Subdivision

9,9999,999,999.00 HUR00000000100011013 Nursing Services/Medical Staffing

0.0001

The following UN/CEFACT Unit of Measure Common Codes are used in this document: HUR Hour

Telephone: (317) 232-3053

Signature of Purchasing Officer	Typed Name Date Signed	Signature Of Approval Office Of the State Attorney General Typed Name	Date Signed
Authorized Signature Indiana Department Of Administration Procurement Division 402 West Washington Street, Rm W468 Indianapolis, Indiana 46204			